

AUG 27 2005

I hereby certify that this correspondence is being faxed to the Assistant Commissioner for Patents at fax number 703-872-9306 on August ~~27~~ 2005

By: Xin Wen

5

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re: Application Nos.: 10/741,805
10/815,326, 10/850,216, 10/893,803

Examiner:

Art Unit:

Newly executed Power of Attorney forms

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313

10

Sirs:

Please find newly executed Power of Attorney forms including updated Customer Number for U.S. Patent Applications Serial Nos. 10/741,805, 10/815,326, 10/850,216, and 10/893,803.

15

Respectfully submitted,

Xin Wen

Xin Wen

Registration No. 53,758
Customer No. 42,256

20

20fs

RECEIVED
CENTRAL FAX CENTER
AUG 27 2005

Please type and sign (or) print this box



PTO/SB/ST (2-2-04)

Approved for use through 10/31/2002. QMS 0657-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to provide information unless it is shown otherwise on a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	10/345,326
	Filing Date	04/2004
	First Named Inventor	Chao Zhang
	Title	SMALL FORM FACTOR PLUGGABLE OPTICAL TRANSCIVER HAVING...
	Group Art Unit	2639
	Examiner Name	FB002
Attorney Docket Number		FB002

I hereby appoint:

☒ Practitioners at Customer Number **42256** → Place Customer Number Bar Code Label here

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for this above-identified application to:

☐ The above-mentioned Customer Number

OR

☐ Practitioners at Customer Number

<input checked="" type="checkbox"/> Firm or Individual Name	Xin Wei				
Address	3949 Rainbow Drive				
City	Palo Alto	State	CA	ZIP	94305
Country	USA				
Telephone	650-858-3817	Fax	650-858-8000		

I am the:

☒ Applicant/Inventor

☐ Assignee of record of the entire interest (Section 37(b) is enclosed (Form ATO/SB/ST).
Statement under 37 CFR 3.73(b) is enclosed (Form ATO/SB/ST).

SIGNATURE of Applicant or Assignee of Record

Name	Chao Zhang
Signature	Chao Zhang
Date	2005.8.25

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 form are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. SF 1156748 v1

BEST AVAILABLE COPY